

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**

 PAGE 1 OF 3  
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Right to Rise USA</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00571372       </div>
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>McCarthy Hennings Whalen, Inc</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 12 / 08 / 2015</div> </div>		
Mailing Address 1850 M Street NW Suite 235			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">4236.24</div>		
City Washington	State DC	Zip Code 20036	<b>Transaction ID : 001</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 12 / 10 / 2015</div> </div>		
Purpose of Expenditure Media Production for National Cable Buy		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>			
Name of Federal Candidate Jeb Bush			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
<div style="border: 1px solid black; padding: 2px; display: inline-block;">8280477.34</div>					

Full Name of Payee <b>McCarthy Hennings Whalen, Inc</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 12 / 08 / 2015</div> </div>		
Mailing Address 1850 M Street NW Suite 235			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">4236.24</div>		
City Washington	State DC	Zip Code 20036	<b>Transaction ID : 002</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 12 / 10 / 2015</div> </div>		
Purpose of Expenditure Media Production		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>			
Name of Federal Candidate Jeb Bush			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>NH</b>		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
<div style="border: 1px solid black; padding: 2px; display: inline-block;">18673415.06</div>					

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">8472.48</div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Charles R. Spies

[Electronically Filed]

Date

MM / DD / YYYY  
12 / 10 / 2015

Signature

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**PAGE 2 OF 3  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Right to Rise USA</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00571372	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>McCarthy Hennings Whalen, Inc</b>			Date of Public Distribution/Dissemination MM / DD / YYYY <b>12 / 08 / 2015</b>		
Mailing Address 1850 M Street NW Suite 235			Amount <b>4236.24</b>		
City Washington	State DC	Zip Code 20036	Transaction ID : 003		
Purpose of Expenditure Media Production		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY <b>12 / 10 / 2015</b>		
Name of Federal Candidate Jeb Bush		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>IA</b>		
Calendar Year-To-Date Per Election for Office Sought		<b>9385076.75</b>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

Full Name of Payee <b>McCarthy Hennings Whalen, Inc</b>			Date of Public Distribution/Dissemination MM / DD / YYYY <b>12 / 08 / 2015</b>		
Mailing Address 1850 M Street NW Suite 235			Amount <b>4236.24</b>		
City Washington	State DC	Zip Code 20036	Transaction ID : 004		
Purpose of Expenditure Media Production		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY <b>12 / 10 / 2015</b>		
Name of Federal Candidate Jeb Bush		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>NV</b>		
Calendar Year-To-Date Per Election for Office Sought		<b>370993.06</b>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<b>8472.48</b>
(b) SUBTOTAL of Unitemized Independent Expenditures .....▶	
(c) TOTAL Independent Expenditures.....▶	

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Charles R. Spies

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**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
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NAME OF COMMITTEE (In Full) <b>Right to Rise USA</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00571372	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>McCarthy Hennings Whalen, Inc</b>			Date of Public Distribution/Dissemination MM / DD / YYYY <b>12 / 08 / 2015</b>		
Mailing Address 1850 M Street NW Suite 235			Amount <b>4236.24</b>		
City Washington	State DC	Zip Code 20036	Transaction ID : 005		
Purpose of Expenditure Media Production		Category/ Type <b>004</b>	Date of Disbursement or Obligation MM / DD / YYYY <b>12 / 10 / 2015</b>		
Name of Federal Candidate Jeb Bush		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>OH</b>		
Calendar Year-To-Date Per Election for Office Sought		<b>403769.47</b>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

Full Name of Payee <b>McCarthy Hennings Whalen, Inc</b>			Date of Public Distribution/Dissemination MM / DD / YYYY <b>12 / 08 / 2015</b>		
Mailing Address 1850 M Street NW Suite 235			Amount <b>4236.24</b>		
City Washington	State DC	Zip Code 20036	Transaction ID : 006		
Purpose of Expenditure Media Production		Category/ Type <b>004</b>	Date of Disbursement or Obligation MM / DD / YYYY <b>12 / 10 / 2015</b>		
Name of Federal Candidate Jeb Bush		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>SC</b>		
Calendar Year-To-Date Per Election for Office Sought		<b>6552053.31</b>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<b>8472.48</b>
(b) SUBTOTAL of Unitemized Independent Expenditures .....▶	
(c) TOTAL Independent Expenditures.....▶	<b>25417.44</b>

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Charles R. Spies

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